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URBAN DISTRICT COUNCIL



ANNUAL REPORT

of

The Medical Officer of Health for 1948



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1949

Brightlingsea Urban District Council.

Annual Report of the Medical Officer of Health for 1948.

Chairman : Cr. C. O. FENSOM.

Vice-Chairman : Cr. T. HANSON.

Members of the Public Health Committee :

Chairman : Cr. H. G. POLLEY, J.P., C.C.

Vice-Chairman : Cr. C. O. FENSOM.

Cr. T. HANSON

Cr. J. ELLIS

Cr. Q. R. CLARK

Cr. I. C. OSBORN

Brightlingsea and Tendring Shell Fish Committee.

Brightlingsea Representatives.

Cr. C. T. HANSON

Cr. I. C. OSBORN

Cr. H. WARREN

Tendring Representatives.

Cr. A. L. HOWSE

Cr. L. G. NEWMAN

Cr. P. B. SMITH

*Town Hall,
Brightlingsea,
August, 1949.*

**To the Chairman and Members of the Brightlingsea Urban
District Council**

Gentlemen,

I have again the honour to present the Annual Report for 1948. The Vital statistics are based upon the estimated population of 4,473 as supplied by the Registrar General. The discrepancies between the national and the local rates for Brightlingsea in respect to deaths and births are due to the age distribution of the population. An abnormally large proportion of the population is elderly and consequently these rates are not comparable with those of England and Wales.

The outstanding features are the absence of both maternal and infantile deaths. It is noteworthy that this is the fourth successive year in which there has been an absence of the former.

The notifications of infectious disease again shows freedom from the more serious types. The thirty cases of jaundice is half the previous year's total and the one case of puerperal pyrexia notified was a mild infection.

The anxiety with respect to water supply both regarding purity and quantity does not affect Brightlingsea now that the new bore is in operation which appears to be very satisfactory and fulfills both these conditions.

The National Health Service Act has now been in operation since July and it may be of interest to review the effects upon local public health administration.

The Act has made considerable modifications in the duties of the Local Authorities. Responsibilities which were previously borne by the Urban District have now been transferred either to the County Council as the Local Health Authority or to other newly constituted bodies.

Brightlingsea is not so much affected as those authorities which had the local control of the Maternity and Child Welfare. However, Brightlingsea has lost all authority in connection with the:

- a Control of isolation and of hospitalisation of Infectious Disease. (Transferred to the Hospital Board)
- b Prophylactic immunisation against diphtheria. (County Council)
- c Home and Domestic Helps (County Council)
- d Ambulance Service. (County Council)

The local Council still retain wholly or in part the control of the following public health matters.

General Public Health.

Abatement of Nuisances.

Provision of Sewerage and Sewage Disposal.

Scavenging.

Prevention of River Pollution.

Cemeteries.

Infectious Disease

Disinfection of Houses and contents, and enquiries.

Food

Inspection of and if found unfit for human consumption, the seizure of such.

Inspection of premises, where food is prepared, stored or exposed for sale.

Investigation of cases of food poisoning.

Milk

Registration of cowsheds, dairies and milk shops. Issuing of dealers' licences for T.B. tested, accredited and pasteurised milks.

Water Supply.

Provision of an adequate and pure water supply to each home.

Rodent Control.

Housing.

Duties imposed by the various Housing Acts and Regulations.

The modern tendency is to centralise over a wider area and so remove the departure from uniformity which complete local control is liable to give to district administration.

Time will show whether the advantages of centralisation will outweigh the loss due to local knowledge.

This local knowledge is most important, for example, in control of infectious disease where the combination of knowledge of local conditions and circumstances, together with the accurate and early information concerning the cases, allows the prompt action necessary in cases of serious epidemics. This prompt action is liable to be lost when administrative procedure becomes too cumbersome.

In presenting this report, I wish to thank the Council for their continual support and also to express my thanks for the help and co-operation of the various officers of the Council and especially to the Senior Sanitary Inspector and Public Health Staff.

I am, Gentlemen,

Your obedient servant,

J. RAMSBOTTOM.

Section A.

Statistics and Social Conditions of the Area.

GENERAL STATISTICS.

Area (exclusive of water)	.....	.....	2,873 acres
Population (1931 Census)	.....	.....	4,145
Population R.G. Estimates 1948	.....	.....	4,473
Number of Inhabited Houses	.....	.....	1,635
Rateable Value	.....	.....	£21,943
Sum Represented by a Penny Rate	.....	.....	£87

EXTRACTS FROM VITAL STATISTICS.

BIRTHS.

	Male	Female	Total
Live Births—Legitimate	28	28	56
Illegitimate	3	3	6
Total Live Births	31	31	62
BIRTH RATE	.....	.....	13.9

STILL BIRTHS.

Still Births—Legitimate	—	2	2
Illegitimate	—	—	—
RATE per 1,000 Live and Still Births (64)	.....	.....	31.25

DEATHS.

Deaths	41	30	71
DEATH RATE (Crude)	.....	.....	15.9

DEATHS FROM DISEASES AND ACCIDENTS OF PREGNANCY AND CHILD BIRTH.

Deaths	Death Rate per 1,000 Live and Still Births
Nil	Nil

DEATHS OF INFANTS UNDER ONE YEAR OF AGE.

NIL

Infantile Death Rate	Nil
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DEATHS FROM MEASLES, WHOOPING COUGH AND

DIARRHOEA (Under 1 year)

NIL

DEATHS FROM TUBERCULOSIS, CANCER & INFLUENZA

DISEASE	Deaths	Death Rate per 1,000 Population
Tuberculosis (Pulmonary Nil) .....	.....	.....
(Non-Pulmonary 2) <i>see page 17</i>	2	.45
Cancer	13	2.91
Influenza	Nil	Nil
Heart Disease	24	5.36

Heart disease alone was the cause of a third of the total deaths. There were 13 cases of death from cancer as compared with 14 in 1947. These two causes represent more than half of the total deaths.

DEATHS AT VARIOUS AGES DURING 1948.

Under 1 Year	1—2	2—5	5—15	15—25	25—35	35—45	45—55
0	0	0	0	1	1	1	9
	55—65	65—75	75—85	85—95	95 and over		
	6	17	30	5	1		
Below are the figures for the last five years :—							
Ages	1948	1947	1946	1945	1944		
0—55	12	11	8	5	17		
55—75	23	27	26	30	28		
75 & OVER	36	28	28	44	29		
	71	66	62	79	74		

CAUSES OF DEATH DURING 1948.

Disease	Male	Female	Total
Tuberculosis of the respiratory system	—	2	2
Tuberculosis (other Forms)	—	—	—
Cancer	6	7	13
Diabetes	—	1	1
Heart Disease	17	7	24
Intercranial Vascular Lesions	6	4	10
Other diseases of the circulatory system	4	4	8
Pneumonia	1	—	1
Other respiratory diseases	1	—	1
Digestive diseases	—	1	1
Nephritis	1	3	4
Road Traffic Accidents	2	—	2
Other Violent causes	1	—	1
All other causes	2	1	3
	41	30	71

There were 5 more deaths in the district as compared with last year. The number of deaths under 45 being 12 of which accidents accounted for 2. There was an increase of 8 deaths in persons over 75. The average age of death was 70.4, whilst the average age at death of persons over 65 is 78 years.

COMPARATIVE STATISTICS.

	Brightlingsea U.D.	Country as a whole
Per 1,000 of population		
Birth Rate	13.9	17.9
Death Rate	15.9	10.8
Scarlet Fever Notifications	Nil	1.73
Diphtheria Notifications	Nil	.08
Per 1,000 births		
Infantile Mortality	Nil	34.0
Maternal Mortality	Nil	1.02
Puerperal Fever and Pyrexia	15.6	6.89

The above table gives the comparison between the vital statistics for the Brightlingsea Urban District with the the corresponding National figures.

Section B.

General Provision of Health Services

Public Health Officers of the Brightlingsea Urban District Council

Medical Officer of Health J. RAMSBOTTOM, M.B., Ch.B., D.P.H., who is also Medical Officer of Health, Tendring R.D.C. and Acting M.O.H Clacton-on-Sea and Frinton and Walton U.D.C., and Assistant County Medical Officer for the same areas.

Sanitary Inspector (Whole-time Officer) Mr. R. BOAST, A.R.I.C.S., Cert. S.I.E., J.B., also acts as Surveyor, Meat and Food Inspector and Officer under the Rats and Mice (Destruction) Act 1919.

Waterworks Manager Mr. I. S. PRIEST (Whole-time Officer)

LABORATORY FACILITIES.

Pathological specimens are examined at the Emergency Laboratory, Essex County Hospital, Colchester, and Water Specimens at the Counties Public Health Laboratory, 66 Victoria Street.

Milk Samples are investigated by the Essex W.A.E.C. Writtle, Chelmsford.

AMBULANCE FACILITIES. The Brightlingsea Ambulance is now under the control of the County as the Local Ambulance Authority.

CLINIC & TREATMENT CENTRES.

A County Maternity and Child Welfare Clinic is held in the New Church School Room each Wednesday from 2 to 4.30 p.m.

During 1948 an Ante-Natal Clinic was commenced on July 1st on the first Thursday in each month from 2 to 4.30 p.m.

DIPHTHERIA IMMUNISATION

Anti-diphtheria inoculations are carried out on the first Wednesday in each month at 10 a.m. also at the New Church School Room.

MIDWIVES AND NURSING HOMES.

In addition to the District Nurse*Midwife there is also a midwife in private practice. There are no Nursing Homes in Brightlingsea.

Section C.

Sanitary Circumstances of the Area, including the Report of the Sanitary Inspector.

WATER SUPPLY.

There are still 14 dwellings in the rural part of the district which obtain their water from shallow wells, and to provide them with main water is not practicable.

The town itself is supplied by the Council's mains, the source of this water is from four wells. Previous to 1931 the water was derived from two bores of a little more than 200 ft in depth reaching the water bearing chalk and from which water was pumped into the existing storage pressure tanks, capable of holding some 72,000 gallons.

In 1933 a 4 inch bore was sunk in Lower Park Road to supplement the existing supply. These three sources proved sufficient until 1936 when it was decided to sink a further 18 inch bore near the existing well in Lower Park, since this was considered by the Council to be the most economical way of guaranteeing an adequate supply of water for the town and so avoid having to obtain a reserve from an outside and much more costly source.

Since the well was brought into operation in 1946 the head of water in the bore has been well maintained and as stated above it is now the main source of supply for the town. Below are given particulars and also the analysis of samples taken in 1937 and 1938. Bacteriologically the water is good but as an extra precaution a small addition of chlorine is added. It will be noticed that there is a slight increase of chlorides in the 1948 analysis, amounting to 5.6 per. cent. Although I am of opinion this amount is of no significance, it still required watching.

Analysis	Parts per million	
	1947	1948
Colour	Nil	Nil
Reaction pH.	7.5	7.5
Alkalinity as Calcium Carbonate	285	295
Hardness Temporary	195	200
Permanent	—	—
Total	195	200
Chlorine as Chlorides	250	264
Ammonia Free	1.3	.85
" Albuminoid .....	.014	Nil
Nitrogen in Nitrites .....	.01	Nil
Nitrogen in Nitrates	Nil	Nil
Free C O. ₂	13	13
Oxygen absorbed in 4 hours at 27 C' .....	.15	.35
Metals : Iron .....	.12	.10
Other metals absent		
Fluorine		

DRAINAGE AND SEWAGE.

No work in this connection was carried out during the year.

RIVERS AND STREAMS

Strictly speaking there are no rivers or streams in the district.

CLOSET ACCOMMODATION

Houses with W.Cs'	1580
Pail Closets	15
Houses with Cesspool Drainage	23

Most of the closets in the district are flushed by cisterns. There are still a certain number of hand flushed closets but the owners are called upon to provide fixed flushing cisterns if and when nuisances arise.

SCAVENGING

Household refuse is collected weekly by direct labour and disposed of by controlled tipping on the Council's Refuse Dump.

SALVAGE

Salvage is carried out in conjunction with scavenging and some 50 tons of salvaged materials have been collected during the year. For details see Sanitary Inspector's Report.

SWIMMING POOL

Fresh salt water is pumped into the Pool at each tide and a complete change of sea water is made every fortnight. Chloration is carried out during the busy season.

ERADICATION OF BED BUGS

	Houses Infested	Houses Disinfested
Council Houses	NIL	NIL
Other Houses	1	1
Buildings other than Dwelling Houses	NIL	NIL

SCHOOLS

There are 2 Schools in the Urban District. The Junior School and the Senior School. These are periodically visited.

FACTORY ACTS 1937 AND 1948.

The 21 Factories on the Register at the end of the year under review received 47 inspections under the provisions of the Factories Acts. All defects found were brought to the notice of the occupiers. For details of inspection see the Sanitary Inspector's Report.

DETAILS OF INSPECTIONS.

Inspections for purposes of provisions as to health, including inspections made by the Sanitary Inspector.

Premises	No on Register	Inspections	Number of Written and Verbal Notices
Factories without mechanical power	4	9	.
Factories with mechanical power	17	38	2
	<u>21</u>	<u>47</u>	<u>3</u>

DEFECTS.

Particulars	Found	Remedied	Referred to H.M. Inspector
Want of cleanliness	1	1	—
Sanitary Conveniences :			
Insufficient	1	—	1
Unsuitable or defective	1	1	—
	<u>3</u>	<u>2</u>	<u>1</u>

Report of the Sanitary Inspector for 1948

I herewith submit my report on work carried out, in accordance with the Sanitary Officers' Order, 1926, during the year 1948, as follows :—

SANITARY INSPECTIONS.

Houses :

(a) General inspections for repairs etc. ...	21
(b) Under Housing Consolidated Regulations ...	5
(c) Re-inspections ...	44

Overcrowding :

(a) Houses measured for Form " B " ...	2
(b) Overcrowding re-inspections ...	7

Infectious Diseases ...	2
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Disinfections ...	2
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Water Supplies ...	15
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Sanitary Conveniences ...	8
---------------------------	---

Sewers, Drains, Ditches and Cesspools ...	31
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Cowsheds and Dairies ...	22
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Slaughterhouses ...	4
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Food Stores... ...	29
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Bakehouses ...	8
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Shops ...	21
-----------	----

Factories and Workshops ...	47
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Schools ...	6
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Tents, Vans and Sheds ...	Nil
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Refuse Disposal ...	12
---------------------	----

Verminous Premises ...	1
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Rat Infestation ...	38
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Public Houses ...	19
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Complaints received and investigated ...	51
--	----

395

Informal Notices served ...	42
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STATUTORY NOTICES SERVED.

Housing Act ...	2
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Public Health Act ...	Nil
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Other Notices ...	Nil
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DEFECTS REMEDIED.

Number of Nuisances and Defects found ...	51
---	----

Number of Nuisances and Defects remedied ..	40
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Number outstanding at end of year ...	11
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Number of Premises Disinfected ...	2
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WATER SUPPLY.

With the exception of a few outlying farms, the whole of the District is served with a piped water supply from the Council's two pumping stations at Church Road, Brightlingsea, and Lower Park Road, Brightlingsea, respectively. Samples taken from the few existing wells were all satisfactory, and routine samples taken at three-monthly intervals from the respective pumping stations all proved satisfactory, on analysis.

DRAINAGE AND SEWERAGE.

In the course of investigating complaints it was found that the general standard of drainage in the older parts of the town, is very bad. Many groups of houses drain into short lengths of Public Sewer which prior to the Public Health Act of 1936, were classed as Combined Drains, and the short lengths of sewer in question are frequently laid entirely in gardens or private land of the houses served, without adequate ventilation or means of access for inspection and cleansing. Owing to heavy demands made on building labour, by the housing programme, it has been difficult to secure the necessary improvements to the sewers in question, and the recovery of expenses incurred in maintaining the short lengths of sewer, is difficult, but constant efforts are made to secure the necessary improvements whenever possible.

SANITARY CONVENIENCES.

Several nuisances were caused by insanitary or defective "short hopper type" W.C. Pans. Wherever this type of Pan is found—and it is fairly prevalent among the older houses—it is being condemned and owners asked to install "pedestal type" wash down W.C.s. Owners are also urged, as far as possible, to provide flushing cisterns for the new type Pans.

PUBLIC CLEANSING AND SALVAGE.

Household refuse is collected from all houses once a week, and disposed of by Controlled Tipping. Once again it has been most difficult to secure the provision of new dustbins, and in view of recent decisions in the courts it is practically impossible to enforce the provisions of Section 75, of The Public Health Act, 1936, the courts having held that, in view of the very high cost of dustbins, it is not reasonable to require the owner of the premises to provide the dustbin.

Treatment of the refuse tip with spray containing D D.T. or Gammexane, in order to control flies and other pests, has continued during the year.

The demand for salvaged materials has decreased considerably, and it is not now an economic proposition to salvage bones or rubber. Rags, bottles, scrap iron and jars continue to be separated from refuse and sold to authorised merchants.

SHOPS ACT.

Routine inspections of shops were carried out, and no serious contravention of the Shops Acts. Three informal notices requiring the provision of suitable and sufficient washing accommodation for employees, were served.

SMOKE ABATEMENT.

No action was necessary in connection with smoke abatement.

FACTORIES ACT.

All factories and workshops were inspected at least twice during the year, as follows :-

Section (s) of Factories Act	No. on Register	No. Inspected	Notices served
1, 2, 3, 4, & 6.	4	9	1
7.	17	38	2

Defects found were as follows :-

Want of cleanliness :	1
Insufficient Sanitary Accommodation : ...	1
Unsuitable or Defective Sanitary Accommodation :	1

DESTRUCTION OF RATS AND MICE.

Complaints of rat or mouse infestation have been dealt with as they have arisen, and no serious infestations have occurred during the year. Routine poisoning has continued at the Council's Refuse Dump, and "Test Baiting" proved that the sewerage system was not infested to any appreciable degree.

SCHOOLS.

Each of the three schools was inspected twice during the year, and the attention of the Education Officer was drawn to certain defects at the Infant School, Station Road. It is understood that this School is only of a temporary nature, and may be closed in the near future.

INSPECTION AND SUPERVISION OF FOOD.

(a) MILK SUPPLY.

Pending the coming into force of Regulations made under the Food and Drug (Milk and Dairies) Act, 1944, the routine inspection of Cowsheds and Dairies has continued and special efforts have been made to ensure a high standard of bacterial purity for milk produced in the district. As in previous years, the main causes of bad samples were inadequate cleansing of utensils or machinery, and unsatisfactory sterilisation. Most of the milk sold by retail in the District is, however, obtained from Stetchworth Dairies Ltd., of Clacton-on-Sea (a branch of Lord Rayleigh's Dairies Ltd.), and this milk, which is processed at various farms in the Chelmsford area of Essex is bulked and pasteurised before being consigned to retailers, although it is not sold as "Pasteurised Milk".

PASTEURISED MILK

One Dealer was licenced to sell Pasteurised Milk, during the year.

(b) MEAT.

The quality of meat sold by butchers has been fairly satisfactory although it has not been comparable with pre-war standards, and carcasses which were really only fit for "manufacturing purposes" have been passed for ordinary sale. All butchers' shops and refrigerated stores were inspected at regular intervals to ensure cleanliness and to ensure that no meat which had become partly decomposed, was used for "manufacture" of minced or other meat foods.

During the year, 69 pigs slaughtered under private licence, were inspected at the slaughter houses

The following meat was condemned as unfit for human consumption:—

14 lbs	Beef	(Deep seated bruising and haemorrhage).
16 lbs.	Beef	(Bone fracture and deep seated haemorrhage).
7 lbs.	Lamb	(Severe bruising).
1	Pig's Head	(Tuberculosis).

The undermentioned foods were also condemned:—

2 stones	Kippers	(Decomposition)
2 stones	Herring Roes	„
2 stones	Place	„
2 tins	Tongue	„
1 tin	Meat and Vegetables	„
3 tins	Luncheon Meat	„
25 lbs	Prunes	(Fermentation)
1 tin	Cheese	(Decomposition)
2 boxes	Cheese	„

5 tins beans	(Blown or perforated tins)
8 tins Milk	"
1 tin Dehydrated Potato	"
1 tin Pilchards	"
1 tin Jam	"
1 tin Tomatoes	"
2 tins Rabbit	"
1 tin Apricots	"
1 tin Fruit Cocktail	"
1 tin Golden Syrup	"
2 tins Peas	"
3 tins Salmon	"
3 tins Sardines	"
2 tins Turkey	"
1 tin of Dried Eggs	(Mould)
1 lb Dates	"
$\frac{1}{2}$ lb Margarine	(Rancid)
$\frac{1}{2}$ lb Butter	"

BAKEHOUSES.

Routine inspections were made, and the general standard of cleanliness was found to be very satisfactory.

FOOD PREMISES.

As in previous years, particular attention has been given to premises where Ice Cream is manufactured or stored, and to Public Houses in connection with the cleansing of drinking glasses.

Ice Cream manufacturers have been urged to use a chemical sterilising agent (Sodium Hypochlorite), in the absence of facilities for Steam Sterilisation, and efforts to secure provision of proper sinks, with hot and cold water, in the bars of Public Houses, have been continued. It does seem that legislation requiring that a suitable sterilising agent be used for washing glasses in Public Houses, is very necessary.

LABORATORY ANALYSES.

The following analyses were carried out during the year :—

Type of Sample	Satisfactory	Unsatisfactory
Water Samples : ...	9	—
Milk Samples : ...	12	2
Bottle Wash : ...	1	—
Ice Cream Samples : ...	7	3

HOUSING.

Complaints received from householders concerning sanitary or structural defects, have been investigated as they have arisen, and in most cases it has been possible to secure execution of the necessary works or repairs by verbal requests or letters to the owners. Owing to the difficulty of finding suitable alternative accommodation, for occupants, it has not been possible to apply Demolition or Closing Orders to the several unfit houses which are incapable of being repaired at reasonable cost, but it has generally been possible to persuade the respective owners to carry out certain most essential repairs, although it cannot be said that the houses are "in all respects—fit for human habitation."

I am, Sir,

Your obedient servant,

R. BOAST, C.S.I.E.J.B., A.R.S.I., M.R.I.P.H.,
(Cert. Meat & Foods)

Sanitary Inspector.

Section D.

Housing

During 1948 three houses were erected by private enterprise and six by the Council ; all of them permanent. No houses were demolished during the year and no demolition orders made.

Housing complaints have been dealt with as they arose. A very considerable amount of repair work was carried out during the year either voluntary or by informal action.

At the end of the year there were 76 applicants on the waiting list for houses, this shows an increase of 14 upon the corresponding figure of last year owing to the fact that many persons residing outside the Urban District are desirous of obtaining the tenancy of a Brightlingsea Council House.

Although the Brightlingsea Urban District have already erected 42 Council Houses and at the present time plans are in hand for the building of a further 20, there still remains a great demand for more, and housing remains the chief menace to Public Health.

Much has been said regarding the necessity of maintaining our standard of living, the two main pillars of which are food and housing. Since the war the latter standard can be observed deteriorating, in spite of the new houses that have been built.

Owing to the rents, the council houses ultimately will most probably become the dwellings of the professional class and the higher paid manual worker, whilst the bulk of the population will be obliged to find accommodation in the cheaper dwellings, whose housing standard will fall in a sliding scale to the level of houses fit for demolition only. A further menace is the question of overcrowding, which is only too common.

It is amongst these low rented houses that the worst housing conditions exist, and where the greatest expense comparative to the rent is required for reconditioning. Owing to this fact it is not an economic proposition for owners to put these houses in good state of repair, hence they continue to deteriorate until they become uninhabitable. If it were possible to make the cost of repair an investment by raising the rent, many of these semi-derelict dwellings could be made to rank with council houses as a housing proposition, and in most cases at a much lower rent. It is essential not merely to maintain the number of houses, but by every means available both by building new houses and repairing old ones to actually increase the number. Until the supply of houses considerably exceeds the demand it is not possible to improve the general housing conditions of the district.

AIR RAID PRECAUTIONS and HOUSING.

With the possibility of aerial warfare of the most intensive type in any future hostilities, it does not appear impracticable to make it obligatory for all new houses to have an effective air raid shelter in the basement which could give reasonable precautions against area bombardment and offer a feasible protection against atomic rays.

Section E.

Inspection of Food

MILK SUPPLY.

Cowsheds and dairies have been regularly visited. There are on the Brightlingsea Register seven producers and ten retailers. Fourteen samples of milk were sent for bacteriological examination during the year, twelve proved to be satisfactory (for details see Sanitary Inspector's Report).

MEAT INSPECTION.

Routine slaughtering is not now carried out in Brightlingsea except under private licence. Particulars of meat and other foods inspected, see Sanitary Inspector's Report.

SHELLFISH (Mulluxan)

During 1948, 2,044,741 Oysters were marketed from Brightlingsea after passing through the cleansing tanks. This compares with :—

1947	...	...	1,294,900
1946	...	..	2,325,364
1945	...	...	1,665,347
1944	...	...	943,082
1943	...	...	940,658
1942	...	...	809,600
1941	...	...	2,055,714
1940	...	...	2,021,293
1939	...	..	3,407,062

Section F.

Prevention of and Control over Infectious Disease.

The following figures show the number of infectious diseases which were notified in the district during 1948.

Whooping Cough	...	...	...	21
Measles	...	...	...	10
Jaundice	...	...	...	30
Pneumonia	...	...	...	Nil
Scarlet Fever	...	...	...	Nil
Erysipelas	...	...	...	Nil
Puerperal Fever	...	...	...	1

The year under review has been remarkably free from serious infectious disease, infectious jaundice accounting for about half the cases.

WHOOPING COUGH.

This was prevalent during the first 3 months of the year and appeared to be the termination of a prolonged mild infection that was present during the whole of 1947. No cases occurred after May 1948.

MEASLES.

The ten cases notified, six of them were received in May.

EPIDEMIC JAUNDICE

This disease was prevalent again, about half of the cases occurred between October and December.

DIPHTHERIA AND DIPHTHERIA PROPHYLAXIS.

The Urban District has again been free from Diphtheria which is now the 5th year in succession.

The returns compiled from the register show that the percentage of children that have been inoculated against the disease show an agreeable increase ; as is indicated by the following figures.

	Number of children in the Urban District	Number inoculated	Percentage inoculated
From birth to 5th year ...	363	190	52.1
From 5th year to 15th year ...	493	382 *	77.4

* This figure of 382 does not include the boosting dose.

It is very instructive to consider the National statistics relating to the prevalence of diphtheria since immunisation was adopted. The present low death rate is still more impressive when it is remembered that the great majority of the 153 deaths were those of non-immunised children.

Year		Number of Cases	Deaths
* 1931—1940	...	55,000	2,800
1940	...	46,281	2,480
1	...	50,797	2,641
2	...	41,404	1,827
3	...	34,662	1,371
4	...	29,949	934
5	...	25,246	722
6	...	18,283	472
7	...	10,465	244
8	...	8,034	150

Immunisation was adopted in 1939 and became fairly general from 1940 onwards.

* Average for the previous ten years.

TUBERCULOSIS.

Two cases of tuberculosis were notified during 1948. One male and one female as below.

Pulmonary	Non-Pulmonary
Female 1 aged 43 years	Male 1 aged 12 years

There were two deaths from Tuberculosis, both females. One aged 70 died of tuberculous enteritis following the pulmonary disease, and the second aged 52 who died in hospital as a result of tuberculous peritonitis, again subsequent to the same condition. Neither of these cases were notified in this area.

Since the war the incidence of tuberculosis has shown a tendency to increase, but this is confined to the Northern industrial areas and Scotland, and up to the present has not affected the Southern and South Eastern part of the Country.

It is difficult to say what factors contribute to this difference, but it tends to show that although tuberculosis appears to be a dying disease, vigilance on the part of local health authorities must not be relaxed.

